

| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | Application or Docket Number 1300-009 | |
|---------------------------------------------------|-----------------------------------------------------------------|--------------|------------------------------------|---------------|------------------------------------------|--------|
| CLAIMS AS FILED - PART I | | | | | SMALL ENTITY OR OTHER THAN SMALL ENTITY | |
| (Column 1) | | (Column 2) | | | | |
| FOR | NUMBER FILED | NUMBER EXTRA | | | RATE | FEE |
| BASIC FEE (37 CFR 1.16(a)) | | | | | | \$ 355 |
| TOTAL CLAIMS (37 CFR 1.16(c)) | 70 | minus 20 = | * | 50 | x \$ 9 = | 450 |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 4 | minus 3 = | * | 1 | x 40 = | 40 |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | | | + | |
| | | | | | TOTAL | 845 |
| | | | | | OR | |
| CLAIMS AS AMENDED - PART II | | | | | SMALL ENTITY OR OTHER THAN SMALL ENTITY | |
| (Column 1) | | (Column 2) | | (Column 3) | | |
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | |
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = | |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | |
| | | | | | | |
| | | | | | TOTAL | |
| | | | | | OR | |
| | | | | | ADDIT. FEE | |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | |
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = | |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | |
| | | | | | | |
| | | | | | TOTAL | |
| | | | | | OR | |
| | | | | | ADDIT. FEE | |
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | |
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = | |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | |
| | | | | | | |
| | | | | | TOTAL | |
| | | | | | OR | |
| | | | | | ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.
 Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.